

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL						
OMB Num	ber:	3235-0076				
Expires:	May	31, 2008 ge burden				
Estimated	avera	ge burden				
hours per r	espon	se 16.00				

SEC USE ONLY							
Profix	Serial						
DATE RE	CEIVED						
	1						

Name of Offering (Check if this is an amendment and name has changed, and indicate change.)	Received SEC
Series B Preferred Stock and underlying Conversion Shares	LOE
Filing Under (Check box(es) that apply).	
Type of Filing: X New Filing Amendment	AUG 1 5 2008
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	Washington, DC 20549
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Equipois Inc.	
Address of Executive Offices 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403 (3	ephone Number (Including Area Code) 10) 597-4044
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Te (if different from Executive Offices)	lephone Number (Including Area Code)
Brief Description of Business The Company is engaged in the business of marketing, distributing and supporting a mechanical exoskeletal a operations, medical device and research, construction, materials handling and other applications.	nm technology for use in manufacturing
Type of Business Organization Imited partnership, already formed other (please s	•
business trust limited partnership, to be formed	AUG 2 2 2008
Actual or Estimated Date of Incorporation or Organization: Month Year	THOMSON REUTERS

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information requested for the following:	
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition 	n of, 10% or more of a class of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporate general and ma 	anaging partners of partnership issuers; and
 Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer	General and/or Managing Partner
Full Name (Last name first, if individual)	
Golden, Eric W.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	r X Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Pringle, David	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	·
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	r ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Lemiey, Christopher	·
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	T X Director General and/or Managing Partner
Full Name (Last name first, if individual)	
DeSalvo, Ernest J.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	D Control of the
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	r 🔀 Director 📋 General and/or Managing Partner
Full Name (Last name first, if individual)	
Weiss, Jason G.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Office	r Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Terrapin Partners Equipois Partnership, LP	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o 2444 Wilshire Blvd., Suite 503, Santa Monica, California 90403	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Office	or Director General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	

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					11 4		nvecto-n!-	this offer	ne?		Yes	N₀ ∑
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									ΙŽĴ			
2 177 - '	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?								s25	5,000 *		
		lesser amo				aty martia			•		Yes	No
3. Does th	e offering	permit joint	ownershi	p of a sing	le unit?							
commis If a pers or state	ssion or sim son to be lis s. list the na	ion request ilar remune ted is an ass ame of the b you may so	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase int of a brok ore than five	ers in conne er or deale (5) persor	ection with r registered ns to be list	sales of sec I with the S ed are asso	EC and/or	ne offering with a state	•	
Full Name (Last name	first, if indi	vidual)									
Business or	Residence	Address (N	umber and	Street, Ci	ity, State, Z	ip Code)		, <u></u>				
Name of As	sociated Br	oker or De	aler	 -	<u> </u>							
States in W												
(Check	"All States	s" or check	individual	States)				.,,		****************	☐ All	States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name ((Last name	first, if indi	vidual)									
Business of	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Name of As	sociated Br	oker or De	aler			 -						
States in W												
(Check	"All States	or check	individual	States)					**************************************		All	States
AL IL MT RI	AK IN NE SC	IA (NV) (SD)	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address ()	Vumber an	d Street, C	City, State,	Zip Code)			<u> </u>		· 	
Name of As	ssociated B	roker or De	aler	<u>-, .</u>								
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	<u></u>					:
(Check	c "All State	s" or check	individual	States)			••••••		· · · · · · · · · · · · · · · · · · ·		. [] Al	l States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR

	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	A	mount Aiready
	Type of Security	Offering Price		Sold
	Debt	ş <u> </u>	\$_	
	Equity (Series B Preferred Stock and underlying Conversion Shares)	3,475,000	\$_	3,475,000
	Common X Preferred			
	Convertible Securities (including warrants)	5	s _	
	Partnership Interests			
	Other (Specify)			
	Total	3,475,000	\$_	3,475,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
ζ.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	_	Aggregate Dollar Amount of Purchases
	Accredited Investors	16 	\$	3,475,000
	Non-accredited Investors	0	\$	
	Total (for filings under Rule 504 only)	0	\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
١.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of	;	Dollar Amount
	Type of Offering	Security O	_	Sold -0-
	Rule 505		\$	
	Regulation A		\$	
	Rule 504	0	\$	
	Total	0	\$,	-0-
ļ	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$_	
	Printing and Engraving Costs		s _	
	Legal Fees	x	2_	100,000
	Accounting Fees		\$_	
	Engineering Fees		\$_	
	Sales Commissions (specify finders' fees separately)		\$_	
	Other Expenses (identify) Miscellaneous offering costs (including blue sky expenses and m	isc.	\$_	5,000
	administrative costs).		\$_	105,000

C. OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS.

No.	C OFFERING PRICE NUM	BERIOF INVESTORS, EXPENSES AND USE OF P.	ROCE	ĒDS .		
7	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross			s	3,370,000
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross				
	·	•	O Dire	ments to fficers, ectors, & filiates		ayments to Others
	Salaries and fees	[_ s		□ \$_	
	Purchase of real estate	[_ s		□ \$_	
	Purchase, rental or leasing and installation of mac and equipment	hinery [\$		s	
	Construction or leasing of plant buildings and fac					
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	\$		s_	
	Repayment of indebtedness	[x] \$	200,000	□ \$_	
	Working capital		s		× \$_	3,170,000
	Other (specify):] \$		□ s _	
			\$		□ s _	·-··
	Column Totals	[x	200,000	× 2_	3,170,000
	Total Payments Listed (column totals added)			X \$		
19		D FEDERAL SIGNATURE		N. Harry		
sigi	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	sion, u	ipon writter	reque	st of its staff,
Issı	er (Print or Type)	Signature	Date	11	_	
Εc	uipois Inc.	Ciw. on	5	129/0	8	
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)				
Eri	c W. Golden	President				

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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)